

# Performance Management Document for Student Employees

---

Department Name: \_\_\_\_\_

Student Name: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Review Period: Spr/Fall \_\_\_\_\_

Date of Evaluation: \_\_\_\_\_

<p><b>1. Job Knowledge and Skills</b></p> <p>Understands the job duties and responsibilities.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Comments:</p>	<p><b>2. Quality of Work</b></p> <p>Performs tasks with accuracy and attention to detail.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Comments:</p>
<p><b>3. Time Management and Dependability</b></p> <p>Manages time effectively and meets deadlines.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Attendance and punctuality.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Comments:</p>	<p><b>4. Communication and Teamwork</b></p> <p>Effectively communicates with supervisor and coworkers.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Works well with others and contributes to a positive work environment.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Comments:</p>
<p><b>5. Initiative and Problem-Solving</b></p> <p>Shows initiative and can solve problems independently.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Comments:</p>	<p><b>6. Professionalism and Attitude</b></p> <p>Displays a positive attitude and behaves professionally.</p> <p><input type="checkbox"/> Excellent</p> <p><input type="checkbox"/> Good</p> <p><input type="checkbox"/> Needs Improvement</p> <p>Comments:</p>

Department Name: \_\_\_\_\_

Student Name: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Review Period: Spr/Fall \_\_\_\_\_

Date of Evaluation: \_\_\_\_\_

## Goals and Development Areas:

---

**Strengths:**

**Areas for Improvement:**

**Future Goals:**

### **Feedback from the Student Employee**

How do you feel about your progress in this position? What challenges have you faced, and how can we support you? What skills or areas would you like to develop further?

---

### **Overall Performance Rating**

Overall, how would you rate the student's performance?

Excellent     Good     Needs Improvement

---

### **Signatures**

Supervisor Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

Student Employee Signature:

\_\_\_\_\_ Date: \_\_\_\_\_

Department Name: \_\_\_\_\_

Student Name: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Review Period: Spr/Fall \_\_\_\_\_

Date of Evaluation: \_\_\_\_\_

---

## Performance Review Plan *(If needed)*

---

### Action Steps for Improvement

- A. Outline specific tasks or behaviors that need improvement.

### Support Provided

- A. Detail how the supervisor will support the student in improving their performance (e.g., additional training, more frequent check-ins).

Review Date: \_\_\_\_\_

Schedule a follow-up meeting to assess progress.

---

### Signatures

Supervisor Signature:

\_\_\_\_\_

Date: \_\_\_\_\_

Student Employee Signature:

\_\_\_\_\_

Date: \_\_\_\_\_